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GAF: Grant Approval Form

FOR GRANT APPLICATIONS \$2,000 OR MORE

Date of Board Meeting: 7/21/09 Office Use Only Agenda Item No. Section 1: General Information: Continuation								
Date of Board Meeting:	1/21/07			Agenda Item No.				
x New Grant	;	Section 1: General Int	formation; JUL 1 2009	☐ Continuation				
Grant Start/End Dates:	08/01/09 - 06/30/10	Application Dead	line: 7/30/09	Grant Amt: \$219,476.00				
Funder's Grant Title: Enhancing Education Through Technology Your Grant Title: Enhancing Education Through Technology								
e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. e.g. Up, Up and Away, Exploring Our Heritage, Young Galileos, etc Information Technology 927-9000 31660								
Grant Writer: School/Dept. Phone Ext								
Grant Contact Person* Joe Binswanger School/Dept Information Technology Phone 927-9000 Ext 31660 *This is the school/district-based person who is in charge of the grant.								
Schools/Programs to be served by this grant # of staff impacted # of students impacted # of parents impacted								
All Schools		Selected Staff of each school	N/A	N/A				
Does this grant requir	e matching funds?		what amount?	How will				
Does this grant require matching funds?Yes _x_No If yes, what amount? How will these funds be raised?								
		Grant Description						
Please fill in all blanks. Do not refer to attachments in your summaries. Do not attach separate sheets.								
•		•	nte how this grant will con	tribute to the needs and				
goals of your School Imp	rovement Plan and/or D	istrict Plan. (Not grant	activities)					
Enhancing Education T	hraugh Technology gr	ant funds professiona	l development opportuni	ties to staff on district				
				tegration. Staff will have a				
variety of methods to receive the training topics.								
Briefly list grant program activities (what is going to be done with the grant funds):								
7F	- # 3* 4-4-4 - 3 4 - 3 4 - 1	Y	A -42703 - A -420432	A -42-37-4				
Training of staff on use of district adopted technology resources; i.e. ActivBoard, ActivStudio, ActivVotes, ActivExpression, AngelWeb, Safari Montage, SuccessMaker, Document Cameras, etc. The grant will also help to fund								
the new student informa	_		g	F •• ••				
Please provide a brief explanation of pertinent budget items that will be funded through this grant. (Please indicate if funds will be								
used for new/old staff position, contracted services, travel, materials/supplies, equipment/furniture, facilities, and other applicable items.) Enhancing Education Through Technology grant will fund substitute teachers, stipends for professional development,								
contracted services, the new student information system, and video conferencing equipment.								
How will grant activities be continued after the end of grant period?								
Professional Development Activities will continue through training activities.								
Leona Campos	- Jan	a Caupa	<u>, </u>	6/26/09				
Print Name of Cost Center Head Signature of Cost Center Head Date Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings								
Sena this completed for	m and I copy of your g	rant to the Grants Offi	ce, Kesearch, Assessment,	and Evaluation-Landings				

Please Type or Print in Ink GAF: Grant Approval Form									
Section Two: Summary for grants over \$2,000.									
(These grants require School Board approval and must be placed on the School Board Agenda by Grants Office staff.)									
Fiscal Management will by District Finance Off				Fund Source:					
☐ School Internal Acco				State					
Other (name):									
Other:									
Name of Primary Fund Source	Funder's Co Name	ler's Contact Funder's Address Phone Number \$ Amount Name							
Citle II Part D: EETT Charles Proctor DOE 944 Turlington Bldg. Tallahassee, FL 32399 850-245-9318 \$219,477.00									
NOTE: If MAJOR TECHNOLOGY is part of this grant:									
Vour school tech			le cameras, DVD playe oust review the physical of		involved and agree				
			beyond what is provided						
complete the proj	ect. Please have	your techr	ology support staff men	iber sign off on your p	roject here.				
		/ A		_					
		T	echnology Support Staff						
		•							
			STRUCTION or requi oject and receive appro						
He can be reached at 361-6311 ext. 68824. If approved, you will need to create a memo for his approval and signature, to be included with your GAF.									
Norman () () () () () () () () () (call ext 927-9000 ext. 32	•					
	9		S OFFICE USE ONL	$\underline{\mathbf{Y}}$					
Section Three: Signatures Grants Office personnel will obtain applicable signatures in this section									
/ Xma (ango,		- <u> </u>	1,4	CONSTRUCT				
*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION *DIRECTOR OF FACILITIES SERVICES SERVICES									
		1/10	_						
- pulse gruye V or file									
RESEARCH, ASSESSMENT & EVALUATION (RAE) DIRECTOR OF BUDGET									
*EXECUTIVE DIRECTOR SEC	OF ELEMENTARY CONDARY	Y, MIDDLE	E, OR AS	SSOCIATE SUPERINTE	NDENT				
Len M. White									
SUPERINTENDENT									
*Signatures needed only if applicable.									

Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings